
By: **Delegate Wood**

Introduced and read first time: February 7, 2003

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Health - Maryland Trauma Center Services Fund - Establishment**

3 FOR the purpose of establishing the Maryland Trauma Center Services Fund; stating
4 the purpose of the Fund; requiring the Maryland Health Care Commission, the
5 Health Services Cost Review Commission, and the Maryland Institute for
6 Emergency Medical Services Systems to jointly establish a selection board to
7 administer the Fund; providing for the membership and staffing of the selection
8 board; authorizing certain trauma centers to submit certain proposals to the
9 selection board; requiring the selection board to evaluate a proposal under
10 certain criteria; requiring the selection board to appropriate certain money from
11 the Fund under certain circumstances; limiting the uses for Fund money;
12 requiring the Maryland Health Care Commission, the Health Services Cost
13 Review Commission, and the Maryland Institute for Emergency Medical
14 Services Systems to file jointly a certain annual report with the General
15 Assembly in a certain manner; specifying a certain purpose of the Maryland
16 Health Care Commission; specifying a certain duty of the Health Services Cost
17 Review Commission; financing the Fund from the General Fund of the State;
18 prohibiting money in or interest derived from the Fund from reverting to the
19 General Fund of the State; requiring the Maryland Health Care Commission
20 and the Health Services Cost Review Commission after certain consultation to
21 adopt certain regulations; defining a certain term; and generally relating to the
22 Maryland Trauma Center Services Fund.

23 BY repealing and reenacting, with amendments,
24 Article - Health - General
25 Section 19-103(c) and 19-207(b)
26 Annotated Code of Maryland
27 (2000 Replacement Volume and 2002 Supplement)

28 BY adding to
29 Article - Health - General
30 Section 19-130
31 Annotated Code of Maryland
32 (2000 Replacement Volume and 2002 Supplement)

1 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
2 MARYLAND, That the Laws of Maryland read as follows:

3 **Article - Health - General**

4 19-103.

5 (c) The purpose of the Commission is to:

6 (1) Develop health care cost containment strategies to help provide
7 access to appropriate quality health care services for all Marylanders, after
8 consulting with the Health Services Cost Review Commission;

9 (2) Promote the development of a health regulatory system that
10 provides, for all Marylanders, financial and geographic access to quality health care
11 services at a reasonable cost by:

12 (i) Advocating policies and systems to promote the efficient
13 delivery of and improved access to health care services; and

14 (ii) Enhancing the strengths of the current health care service
15 delivery and regulatory system;

16 (3) Facilitate the public disclosure of medical claims data for the
17 development of public policy;

18 (4) Establish and develop a medical care data base on health care
19 services rendered by health care practitioners;

20 (5) Encourage the development of clinical resource management systems
21 to permit the comparison of costs between various treatment settings and the
22 availability of information to consumers, providers, and purchasers of health care
23 services;

24 (6) In accordance with Title 15, Subtitle 12 of the Insurance Article,
25 develop:

26 (i) A uniform set of effective benefits to be included in the
27 Comprehensive Standard Health Benefit Plan; and

28 (ii) A modified health benefit plan for medical savings accounts;

29 (7) Analyze the medical care data base and provide, in aggregate form,
30 an annual report on the variations in costs associated with health care practitioners;

31 (8) Ensure utilization of the medical care data base as a primary means
32 to compile data and information and annually report on trends and variances
33 regarding fees for service, cost of care, regional and national comparisons, and
34 indications of malpractice situations;

1 (9) Establish standards for the operation and licensing of medical care
2 electronic claims clearinghouses in Maryland;

3 (10) Reduce the costs of claims submission and the administration of
4 claims for health care practitioners and payors;

5 (11) Develop a uniform set of effective benefits to be offered as
6 substantial, available, and affordable coverage in the nongroup market in accordance
7 with § 15-606 of the Insurance Article;

8 (12) Determine the cost of mandated health insurance services in the
9 State in accordance with Title 15, Subtitle 15 of the Insurance Article; [and]

10 (13) Promote the availability of information to consumers on charges by
11 practitioners and reimbursements from payors; AND

12 (14) OVERSEE AND ADMINISTER THE MARYLAND TRAUMA CENTER
13 SERVICES FUND IN CONJUNCTION WITH THE HEALTH SERVICES COST REVIEW
14 COMMISSION AND THE MARYLAND INSTITUTE FOR EMERGENCY MEDICAL SERVICES
15 SYSTEMS.

16 19-130.

17 (A) IN THIS SECTION, "FUND" MEANS THE MARYLAND TRAUMA CENTER
18 SERVICES FUND.

19 (B) (1) THERE IS A MARYLAND TRAUMA CENTER SERVICES FUND.

20 (2) THE PURPOSE OF THE FUND IS TO ENSURE THE CONTINUING CARE
21 OF PATIENTS ON THE TRAUMA REGISTRY, IN A TRAUMA CENTER THAT IS
22 DESIGNATED BY OR CONTRACTS WITH THE MARYLAND INSTITUTE FOR EMERGENCY
23 MEDICAL SERVICES SYSTEMS AS THE STATE PRIMARY ADULT RESOURCE CENTER, A
24 LEVEL I, LEVEL II, OR LEVEL III TRAUMA CENTER, OR A PEDIATRIC TRAUMA CENTER,
25 BY SUBSIDIZING THE DOCUMENTED COSTS:

26 (I) TO TRAUMA CENTER PHYSICIANS OF UNCOMPENSATED CARE
27 PROVIDED TO TRAUMA PATIENTS; AND

28 (II) TO TRAUMA CENTERS OF PROVIDING 24-HOUR PER DAY
29 ON-CALL PHYSICIAN COVERAGE.

30 (C) (1) THE FUND IS A CONTINUING, NONLAPSING FUND WHICH IS NOT
31 SUBJECT TO § 7-302 OF THE STATE FINANCE AND PROCUREMENT ARTICLE.

32 (2) INTEREST AND EARNINGS ON THE FUND SHALL BE SEPARATELY
33 ACCOUNTED FOR AND CREDITED TO THE FUND, AND ARE NOT SUBJECT TO § 6-226(A)
34 OF THE STATE FINANCE AND PROCUREMENT ARTICLE.

35 (D) (1) THE FUND CONSISTS OF MONEY APPROPRIATED IN THE STATE
36 BUDGET TO THE FUND.

1 (2) FOR FISCAL YEAR 2004 AND EACH SUCCEEDING FISCAL YEAR, THE
2 GOVERNOR SHALL INCLUDE \$15,000,000 FOR THE FUND IN THE STATE BUDGET.

3 (E) (1) (I) THE MARYLAND HEALTH CARE COMMISSION, THE HEALTH
4 SERVICES COST REVIEW COMMISSION, AND THE MARYLAND INSTITUTE FOR
5 EMERGENCY MEDICAL SERVICES SYSTEMS JOINTLY SHALL ESTABLISH A SELECTION
6 BOARD TO ADMINISTER THE FUND.

7 (II) THE SELECTION BOARD SHALL CONSIST OF SIX MEMBERS,
8 WITH TWO MEMBERS EACH APPOINTED BY THE EXECUTIVE DIRECTORS OF THE
9 HEALTH CARE COMMISSION, THE HEALTH SERVICES COST REVIEW COMMISSION,
10 AND THE MARYLAND INSTITUTE FOR EMERGENCY MEDICAL SERVICES SYSTEMS.

11 (III) THE EXECUTIVE DIRECTOR OF THE HEALTH CARE
12 COMMISSION SHALL APPOINT THE CHAIRMAN OF THE SELECTION BOARD.

13 (IV) THE HEALTH CARE COMMISSION SHALL STAFF THE SELECTION
14 BOARD.

15 (2) THE SELECTION BOARD SHALL ADMINISTER THE FUND AS
16 PROVIDED IN THIS SUBSECTION.

17 (3) A DESIGNATED TRAUMA CENTER OR AN OUT-OF-STATE PEDIATRIC
18 TRAUMA CENTER THAT HAS CONTRACTED WITH THE MARYLAND INSTITUTE FOR
19 EMERGENCY MEDICAL SERVICES SYSTEMS MAY DEVELOP AND SUBMIT TO THE
20 SELECTION BOARD A PROPOSAL TO ALLEVIATE THE COSTS:

21 (I) TO PHYSICIANS OF UNCOMPENSATED CARE PROVIDED TO
22 TRAUMA PATIENTS; OR

23 (II) TO TRAUMA CENTERS OF PROVIDING 24-HOUR PER DAY
24 ON-CALL PHYSICIAN COVERAGE.

25 (4) THE SELECTION BOARD SHALL EVALUATE A PROPOSAL UNDER THIS
26 SUBSECTION BASED ON, IF RELEVANT:

27 (I) THE AMOUNT OF PHYSICIAN UNCOMPENSATED CARE
28 PROVIDED;

29 (II) THE NUMBER OF PATIENTS SERVED BY A TRAUMA CENTER OR
30 TRAUMA CENTER PHYSICIAN;

31 (III) THE NUMBER OF MARYLAND RESIDENTS SERVED BY A TRAUMA
32 CENTER OR TRAUMA CENTER PHYSICIAN;

33 (IV) THE EXTENT TO WHICH PHYSICIAN UNCOMPENSATED CARE
34 COSTS ARE OTHERWISE SUBSIDIZED BY HOSPITALS, THE FEDERAL GOVERNMENT,
35 AND OTHER SOURCES; OR

1 (V) THE COST TO THE TRAUMA CENTER OR TRAUMA CENTER
2 PHYSICIANS OF PROVIDING 24-HOUR PER DAY ON-CALL PHYSICIAN COVERAGE.

3 (5) (I) ON APPROVAL BY THE SELECTION BOARD OF A PROPOSAL OF A
4 DESIGNATED TRAUMA CENTER, THE SELECTION BOARD SHALL APPROPRIATE
5 MONEY FROM THE FUND TO THE DESIGNATED TRAUMA CENTER TO IMPLEMENT THE
6 PROPOSAL.

7 (II) A DESIGNATED TRAUMA CENTER MAY USE MONEY
8 APPROPRIATED FROM THE FUND ONLY FOR THE PURPOSES IDENTIFIED IN THE
9 PROPOSAL.

10 (F) THE MARYLAND HEALTH CARE COMMISSION, THE HEALTH SERVICES
11 COST REVIEW COMMISSION, AND THE MARYLAND INSTITUTE FOR EMERGENCY
12 MEDICAL SERVICES SYSTEMS ANNUALLY JOINTLY SHALL SUBMIT A REPORT TO THE
13 GENERAL ASSEMBLY IN ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT
14 ARTICLE WHICH SHALL INCLUDE:

15 (1) THE AMOUNT OF MONEY IN THE FUND;

16 (2) THE AMOUNT OF MONEY APPLIED FOR BY ELIGIBLE PHYSICIANS
17 AND TRAUMA CENTERS;

18 (3) THE AMOUNT OF MONEY DISTRIBUTED FROM THE FUND TO
19 PHYSICIANS AND TRAUMA CENTERS;

20 (4) A DESCRIPTION OF ANY PROPOSAL APPROVED OR REJECTED BY THE
21 SELECTION BOARD AND THE REASONS FOR THE APPROVAL OR REJECTION; AND

22 (5) ANY RECOMMENDATIONS FOR ALTERING THE MANNER IN WHICH
23 TRAUMA PHYSICIAN UNCOMPENSATED CARE COSTS AND 24-HOUR PER DAY
24 ON-CALL PHYSICIAN COVERAGE COSTS ARE REIMBURSED.

25 (G) THE MARYLAND HEALTH CARE COMMISSION AND THE HEALTH SERVICES
26 COST REVIEW COMMISSION, IN CONSULTATION WITH THE MARYLAND INSTITUTE
27 FOR EMERGENCY MEDICAL SERVICES SYSTEMS, SHALL ADOPT REGULATIONS TO
28 IMPLEMENT THIS SECTION.

29 19-207.

30 (b) In addition to the duties set forth elsewhere in this subtitle, the
31 Commission shall:

32 (1) Adopt rules and regulations that relate to its meetings, minutes, and
33 transactions;

34 (2) Keep minutes of each meeting;

1 (3) Prepare annually a budget proposal that includes the estimated
2 income of the Commission and proposed expenses for its administration and
3 operation;

4 (4) Within a reasonable time after the end of each facility's fiscal year or
5 more often as the Commission determines, prepare from the information filed with
6 the Commission any summary, compilation, or other supplementary report that will
7 advance the purposes of this subtitle;

8 (5) Periodically participate in or do analyses and studies that relate to:

9 (i) Health care costs;

10 (ii) The financial status of any facility; or

11 (iii) Any other appropriate matter; [and]

12 (6) On or before October 1 of each year, submit to the Governor, to the
13 Secretary, and, subject to § 2-1246 of the State Government Article, to the General
14 Assembly an annual report on the operations and activities of the Commission during
15 the preceding fiscal year, including:

16 (i) A copy of each summary, compilation, and supplementary report
17 required by this subtitle; and

18 (ii) Any other fact, suggestion, or policy recommendation that the
19 Commission considers necessary; AND

20 (7) **OVERSEE AND ADMINISTER THE MARYLAND TRAUMA CENTER**
21 **SERVICES FUND IN CONJUNCTION WITH THE MARYLAND HEALTH CARE**
22 **COMMISSION AND THE MARYLAND INSTITUTE FOR EMERGENCY MEDICAL SERVICES**
23 **SYSTEMS.**

24 **SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take**
25 **effect July 1, 2003.**